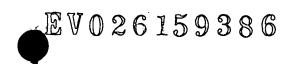
Please type a plus sign (+) inside this box → +	PTO/SB/05 (4/98) Approved for use through 09/30/2000. OMB 0651-0032 Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE ed to respond to a collection of information unless it displays a valid OMB control number.
UTILITY	Attorney Docket No. MI22-1941
PATENT APPLICATION	First Inventor or Application Identifier Craig M. Carpenter
TRANSMITTAL	Title Interfacial Structure for Semiconductor Substrate Processing

City for field in	onprovisional applications under 37 C.F.R. § 1.33(b)) Exp	EV 020139300 05		
	PPLICATION ELEMENTS apter 600 concerning utility patent application contents.	Assistant Commissioner for Patents ADDRESS TO: Box Patent Application O Washington, DC 20231		
2. X Sp (pr - D - S	Fee Transmittal Form (e.g., PTO/SB/17) Submit an original and a duplicate for fee processing) Description [Total Pages] Descriptive title of the Invention Plus title places Cross References to Related Applications Statement Regarding Fed sponsored R & D Reference to Microfiche Appendix	5. Microfiche Computer Program (Appendix) 6. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. Computer Readable Copy b. Paper Copy (identical to computer copy) c. Statement verifying identity of above copies		
. B	Background of the Invention	ACCOMPANYING APPLICATION PARTS		
- E - E - E - C - C - A - A - A - C - A - A - A - A	Brief Summary of the Invention Brief Description of the Drawings (if filed) Detailed Description Claim(s) Abstract of the Disclosure Fawing(s) (35 U.S.C. 113) [Total Sheets]	7. X Assignment Papers (cover sheet & document(s)) 8. 37 C.F.R.§3.73(b) Statement Power of (when there is an assignee) 9. English Translation Document (if applicable) 10. Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 11. Preliminary Amendment 12. X Return Receipt Postcard (MPEP 503) (Should be specifically itemized) * Small Entity Statement filed in prior application Status still proper and desired (PTO/SB/09-12) 14. Certified Copy of Priority Document(s) (if foreign priority is claimed) 15. X Other: Check for \$3.054.00		
16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment: Continuation Divisional Continuation-in-part (CIP) of prior application No: For application information: Examiner Group / Art Unit: For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.				
	17. CORRESPON			
X Custon	ner Number or Bar Code Labe I 021 (Insert Customer No. or A	or Correspondence address below		
Name	Mark S. Matkin Wells St. John P.S.			
Address	601 West First Avenue, Suite 1300	· ·		
City	Spokane State	WA Zip Code 99201-3828		
Country	Telephone	509-624-4276 Fax 509-838-3424		
	Print/Type) Mark S. Matkin	Registration No. (Attorney/Agent) 32,268 Date 2/22/02		

Signature

WARNING:



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MI22-1941

Date

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FEE TRANSMITTAL	C mpl te if Known		
	Application Number	Unknown	
for FY (2002)	Filing Date	Filed Herewith	
Patent fees are subject to annual revision.	First Named Inventor	Craig M. Carpenter	
Small Entity payments <u>must</u> be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12.	Examiner Name	Unknown	
See 37 C.F.R. §§ 1.27 and 1.28.	Group / Art Unit	Unknown	
TOTAL AMOUNT OF PAYMENT (\$)3,054.00	Attorney Docket No.	MI22-1941	

Attorney Docket No.

METHOD OF PAYMENT (check one)	FEE CALCULATION (continued)				
The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to: Deposit	3. ADDITIONAL FEES Large Entity Small Entity Fee	Fee Paid			
Account Number 23-0925	Code (\$) Code (\$) 105 130 205 65 Surcharge - late filing fee or oath	0.00			
Deposit Account Wells St. John P.S.	127 50 227 25 Surcharge - late provisional filing fee or cover sheet.	0.00			
Account Name Wells St. John P.S.	139 130 139 130 Non-English specification	0.00			
Charge Any Additional Fee Required Under 37 CFR §§ 1.16 and 1.17	147 2,520 147 2,520 For filing a request for reexamination	0.00			
2. X Payment Enclosed:	112 920* 112 920* Requesting publication of SIR prior to Examiner action	0.00			
Z. X. Payment Enclosed. X Check Money Other Other	113 1,840* 113 1,840* Requesting publication of SIR after Examiner action	0.00			
FEE CALCULATION	115 110 215 55 Extension for reply within first month	0.00			
to avenue and the second secon	116 380 216 190 Extension for reply within second month	0.00			
1. BASIC FILING FEE	117 870 217 435 Extension for reply within third month	0.00			
Large Entity Small Entity Fee Fee Fee Fee Description	118 1,360 218 680 Extension for reply within fourth month	0.00			
Code (\$) Code (\$) Fee Paid	128 1,850 228 925 Extension for reply within fifth month	0.00			
101 690 201 345 Utility filing fee 740.00	119 300 219 150 Notice of Appeal	0.00			
106 310 206 155 Design filing fee	120 300 220 150 Filing a brief in support of an appeal	0.00			
107 480 207 240 Plant filing fee	121 260 221 130 Request for oral hearing	0.00			
108 690 208 345 Reissue filing fee	138 1,510 138 1,510 Petition to institute a public use proceeding	0.00			
114 150 214 75 Provisional filing fee	140 110 240 55 Petition to revive - unavoidable	0.00			
SUBTOTAL (1) (\$) 740.00	141 1,210 241 605 Petition to revive - unintentional	0.00			
2. EXTRA CLAIM FEES	142 1,210 242 605 Utility issue fee (or reissue)	0.00			
Fee from Extra Claims below Fee Paid	143 430 243 215 Design issue fee	0.00			
Total Claims 109 -20** = 89 × 18 = 1602	144 580 244 290 Plant issue fee	0.00			
Independent 11 - 3** = 8 x 84 = 672	122 130 122 130 Petitions to the Commissioner	0.00			
Multiple Dependent =0	123 50 123 50 Petitions related to provisional applications	0.00			
**or number previously paid, if greater, For Reissues, see below	126 240 126 240 Submission of Information Disclosure Stmt				
Large Entity Small Entity Fee Fee Fee Fee Fee Description	581 40 581 40 Recording each patent assignment per	0.00			
Code (\$) Code (\$)	property (times number of properties) 146 690 246 345 Filipp a submission after final rejection	40.00			
103 18 203 9 Claims in excess of 20 102 78 202 39 Independent claims in excess of 3	(37 ČFR § 1.129(a))	0.00			
104 260 204 130 Multiple dependent claim, if not paid	149 690 249 345 For each additional invention to be examined (37 CFR § 1.129(b))	0.00			
109 78 209 39 **Reissue independent claims over original patent	Other fee (specify)	0.00			
110 18 210 9 ** Reissue claims in excess of 20 and over original patent	Other fee (specify)	0.00			
SUBTOTAL (2) (\$) 2,274.00	Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 40				
SUBMITTED BY Complete (if applicable)					
Name (Print/Type) Mark S. Matkin Registration No. 32.268 Telephone 509-624-4276					

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